

POLICY AND COMMUNICATIONS BULLETIN

THE CLINICAL CENTER

Medical Administrative Series

M95-10 (rev.)

18 July 2000

MANUAL TRANSMITTAL SHEET

SUBJECT: Housing of Pediatric Patients in the Clinical Center

1. Explanation of Material Transmitted: This issuance sets forth the policy of the Warren Grant Magnuson Clinical Center regarding the assignment of pediatric patients to patient care units. The policy was reviewed by the Medical Executive Committee on 18 July 2000 and approved with changes, notably that pediatric patients should not room with adults that are not immediate relatives.
2. Material Superseded: MAS No. M95-10 (rev.), dated 9 September 1997
3. Filing Instructions: "Other" Section

Remove: No. M95-10 (rev.), dated 9 September 1997

Insert: No. M95-10 (rev.), dated 18 July 2000

DISTRIBUTION

Physicians, Dentists and Other Practitioners Participating in
Patient Care

POLICY AND COMMUNICATIONS BULLETIN

THE CLINICAL CENTER

Medical Administrative Series

M95-10 (rev.)

18 July 2000

SUBJECT: Housing of Pediatric Patients in the Clinical Center

PURPOSE

This issuance sets forth the policy of the Warren Grant Magnuson Clinical Center regarding the assignment of pediatric patients to patient care units.

POLICY

Pediatric inpatients will be housed on patient care units suitable for their needs. Assignment to other units will be approved only if appropriate justification is provided. In all situations, pediatric patients should not share a room with an adult patient, unless they are immediate relatives.

PROCEDURES

1. The patient care units (PCUs) in the Clinical Center presently considered appropriate for the care of pediatric inpatients are:

- 10 D
- 9 West
- 13 West
- 2 West, 7 East
- 3 East Child.

Other PCUs may be substituted as necessary when renovations are in progress.

2. Requests for admission of pediatric patients to other, primarily non-pediatric, PCUs should be sent to the chief, pediatric services, or designee, with a specific reason why a primarily pediatric unit is considered unsuitable.
3. The chief, pediatric services, or designee, will, in consultation with the interdisciplinary staff, attempt to address each reason why an established pediatric unit is considered unsuitable. If the interdisciplinary team believes they can accommodate the special needs of the patient and family on a pediatric unit, the request will not be approved, and a detailed response explaining how the pediatric unit can best serve the patient and family will be sent to the investigator. If the patient's care is clearly better served by being admitted to a primarily non-pediatric unit, the request will be approved and returned to the investigator by the chief, pediatric services, or designee.
4. Should the request not be approved, the investigator has the option of appeal to the Clinical Center's Deputy Director for Clinical Care, to whom all documentation regarding the request will be sent.